/ 0 0838 3 2—
Application or Docket Number
4795 - 005

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			17					RATE	FEE	1	RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00		
TOTAL CHARGEABLE CLAIMS /7 mir				nus 20=	* <	0		X\$ 9=		OR	X\$18=			
INC	INDEPENDENT CLAIMS Uminus 3				. 2			X42=		OR	X84=	_		
ML	MULTIPLE DEPENDENT CLAIM PRESENT							+140=		OR	+280=			
* If the difference in column 1 is less than zero, enter *						column 2		TOTAL		ÖR	TOTAL			
	C	(Column 1)	MENDE	D - PAR (Colur		(Column 3)	L.	SMALL	ENTITY	OR	OTHER SMALL			
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
Š	Total	. 30	Minus ·	** /	10	= 90		X\$ 9=	: .	OR	X\$18=			
AME	Independent	ENTATION OF MI	Minus	MAN DENDEND	[= 43		X42=	•	OR	X84=			
	rinot Pricot	ENTATION OF MI	JETIPLE DE	PENDENI	CLAIM		1	+140=		OR	+280=			
								TOTAL ADDIT, FEE		00	TOTAL ADDIT, FEE			
		(Column 1)		(Colur		(Column 3)					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	*.		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total-	*	Minus	##		-		X\$ 9=		OR	X\$18≃	¥		
	Independent	<u> </u> *	Minus	***]	X42=		OR	X84=			
_	FIRST PRESE	NTATION OF ML	ILTIPLE DEI	PENDENT	CLAIM		1	+140=		OR	+280=			
							L	TOTAL ODIT. FEE		`I	TOTAL ADDIT. FEE			
_		(Column 1) CLAIMS		(Colun		(Column 3)	۱ -							
)		REMAINING AFTER AMENDMENT		PREVIO PAID I	BER JUSLY	PRESENT EXTRA			ADDI- FEE		RATE	ADDI- TIONAL FEE		
AMENDMEN	Total	±	Minus	**		= '	lt	X\$ 9=		OR	X\$18=			
	Independent	*	Minus	***		=	lŀ	X42=			X84=			
'	FIRST PRESE	NTATION OF ML	LTIPLE DE	PENDENT	CLAIM		▎┟	^42-	\dashv	OR	A04=			
• 15	the entry in colu	mn 1 is less than th	e entry in colu	ma 2 write	"O" in col	ıma 3	L	+140=		OR	+280=			
** H	the "Highest Nu	mber Previously Pa mber Previously Pa mber Previously Pa	id For IN THI	S SPACE is	less than	20, enter "20."	· ~	TOTAL DDIT. FEE		OR ,	TOTAL ODIT. FEE			
		ther Previously Paid					r four	d in the appr	opriat box	in colu	umn 1.			